

B6F (Official Form 6F) (12/07)

In re **Bobby L Hitt, Jr.,  
Fiona G Hitt**Case No. **15-15045-led**

Debtors

**AMENDED  
SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H U S B A N D W I F E J O I N T C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>xx1130****</b>  <b>Aargon Agency</b> <b>8668 Spring Mountain Road</b> <b>Las Vegas, NV 89117</b>		<b>C</b>	<b>Opened 02/2014</b>  <b>Collections Agency - Nevada Energy</b>				<b>319.00</b>
Account No. <b>xxxx5010</b>  <b>Adrian Adrian, MD</b> <b>5940 S. Rainbow Blvd</b> <b>Las Vegas, NV 89118</b>		<b>C</b>	<b>Medical Services</b>				<b>1,176.00</b>
Account No. <b>x6680****</b>  <b>Allied Collection Service</b> <b>3080 S. Durango Drive</b> <b>Suite 208</b> <b>Las Vegas, NV 89117-9186</b>		<b>C</b>	<b>Opened 07/2013</b>  <b>Collections Agency - Christopher AHN, MD.</b>				<b>138.00</b>
Account No. <b>x8611****</b>  <b>Allied Collection Service</b> <b>3080 S. Durango Drive</b> <b>Suite 208</b> <b>Las Vegas, NV 89117-9186</b>		<b>C</b>	<b>Opened 11/2009</b>  <b>Collections Agency - Sean Dempsey, MD.</b>				<b>658.00</b>
Subtotal (Total of this page)							<b>2,291.00</b>

6 continuation sheets attached

B6F (Official Form 6F) (12/07) - Cont.

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(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>x1100****</b>	<b>C</b>	<b>Opened 06/2011</b>				<b>364.00</b>
<b>Allied Collection Service 3080 S. Durango Drive Suite 208 Las Vegas, NV 89117-9186</b>		<b>Collections Agency - Arnold Debelen, MD.</b>				
Account No. <b>x7968****</b>	<b>C</b>	<b>Opened 06/2014</b>				<b>1,029.00</b>
<b>Allied Collection Service 3080 S. Durango Drive Suite 208 Las Vegas, NV 89117-9186</b>		<b>Collections Agency - Nevada Digestive Disease Center</b>				
Account No. <b>xxxx # xxx-xx0861</b>	<b>C</b>	<b>Judgment - Garnishment</b>				<b>4,150.73</b>
<b>Allied Collection Service 3080 S. Durango Drive Suite 208 Las Vegas, NV 89117-9186</b>						
Account No. <b>x6471**</b>	<b>C</b>	<b>Opened 06/2013</b>				<b>77.00</b>
<b>Armada Corp 93 Eastmont Avenue Suite 100 East Wenatchee, WA 98802</b>		<b>Collections Agency - Health Care Partners</b>				
Account No. <b>x1656**</b>	<b>C</b>	<b>Opened 01/2013</b>				<b>63.00</b>
<b>BYL Collection Services 301 Lacey St West Chester, PA 19382</b>		<b>Collections Agency - Southwest Gas</b>				
Sheet no. <u>1</u> of <u>6</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>Subtotal (Total of this page)</b>
						<b>5,683.73</b>

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In re **Bobby L Hitt, Jr.,  
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**AMENDED****SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>xxxxx8010</b>  <b>Check City</b> <b>6510 North Buffalo Drive</b> <b>Las Vegas, NV 89131</b>	<b>C</b>	<b>Payday Loan</b>				<b>300.00</b>
Account No. <b>x2421**</b>  <b>Clark County Collection Services</b> <b>8860 W. Sunset Road</b> <b>Suite 100</b> <b>Las Vegas, NV 89148</b>		<b>Opened 12/2013</b> <b>Collections Agency - Dollar Loan Center</b>				<b>367.00</b>
Account No. <b>x2721**</b>  <b>Clark County Collection Services</b> <b>8860 W. Sunset Road</b> <b>Suite 100</b> <b>Las Vegas, NV 89148</b>	<b>C</b>	<b>Opened 01/2014</b> <b>Collections Agency - Dollar Loan Center</b>				<b>171.00</b>
Account No. <b>x6969**</b>  <b>Clark County Collection Services</b> <b>8860 W. Sunset Road</b> <b>Suite 100</b> <b>Las Vegas, NV 89148</b>		<b>Opened 02/2013</b> <b>Collections Agency - Desert Radiologists</b>				<b>258.00</b>
Account No. <b>x6969**</b>  <b>Clark County Collection Services</b> <b>8860 W. Sunset Road</b> <b>Suite 100</b> <b>Las Vegas, NV 89148</b>	<b>C</b>	<b>Opened 02/2013</b> <b>Collections Agency - Desert Radiologists</b>				<b>315.00</b>
Sheet no. <b>2</b> of <b>6</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		Subtotal (Total of this page)				<b>1,411.00</b>

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**AMENDED****SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.					
Account No. <b>x6969**</b>	<b>C</b>	<b>Opened 02/2013</b>				<b>132.00</b>	
<b>Clark County Collection Services</b> <b>8860 W. Sunset Road</b> <b>Suite 100</b> <b>Las Vegas, NV 89148</b>		<b>Collections Agency - Desert Radiologists</b>					
Account No. <b>x6969**</b>	<b>C</b>	<b>Opened 02/2013</b>				<b>180.00</b>	
<b>Clark County Collection Services</b> <b>8860 W. Sunset Road</b> <b>Suite 100</b> <b>Las Vegas, NV 89148</b>		<b>Collections Agency - Desert Radiologists</b>					
Account No. <b>xxxxxxxxxxxx1037****</b>	<b>C</b>	<b>Opened 03/2009</b>				<b>581.00</b>	
<b>CMRE Financial Services, Inc ☐☐</b> <b>3075 E Imperial Hwy</b> <b>Suite 200</b> <b>Brea, CA 92821</b>		<b>Collections Agency - Medical Payment Data</b>					
Account No. <b>xxxxxxxxxxxx1296****</b>	<b>C</b>	<b>Opened 12/2009</b>				<b>833.00</b>	
<b>CMRE Financial Services, Inc ☐☐</b> <b>3075 E Imperial Hwy</b> <b>Suite 200</b> <b>Brea, CA 92821</b>		<b>Collections Agency - Medical Payment Data</b>					
Account No. <b>xxx3921****</b>	<b>C</b>	<b>Opened 09/2014</b>				<b>788.00</b>	
<b>Common Wealth Financial</b> <b>245 Main Street</b> <b>Scranton, PA 18519</b>		<b>Collections Agency - EM Care Center</b>					
Sheet no. <u>3</u> of <u>6</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>Subtotal</b> (Total of this page)	<b>2,514.00</b>

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**AMENDED****SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>xxxxx3905</b>  <b>Cox Communications</b> <b>P.O. Box 1259</b> <b>Dept. 10227</b> <b>Oaks, PA 19456</b>	<b>C</b>	<b>Cable Bill</b>				<b>458.00</b>
Account No. <b>x1423**</b>  <b>Dollar Loan Center</b> <b>6122 W. Sahara Avenue</b> <b>Las Vegas, NV 89146-3051</b>	<b>C</b>	<b>Opened 04/2013</b> <b>Payday Loan</b>				<b>367.00</b>
Account No. <b>x1272**</b>  <b>Dollar Loan Center</b> <b>6122 W. Sahara Avenue</b> <b>Las Vegas, NV 89146-3051</b>	<b>C</b>	<b>Opened 03/2013</b> <b>Payday Loan</b>				<b>171.00</b>
Account No. <b>xxx8197</b>  <b>Financial Corporation of America</b> <b>12515 Research Blvd.</b> <b>Bldg 2, Suite 100</b> <b>Austin, TX 78759</b>	<b>C</b>	<b>Collections Agency - Summerlin Hospital</b>				<b>22,597.40</b>
Account No. <b>xxxx9267</b>  <b>Financial Corporation of America</b> <b>12515 Research Blvd.</b> <b>Bldg 2, Suite 100</b> <b>Austin, TX 78759</b>	<b>C</b>	<b>Collections Agency - Summerlin Hospital</b>				<b>17,750.60</b>
Sheet no. <b>4</b> of <b>6</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>Subtotal</b> (Total of this page) <b>41,344.00</b>

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(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>x6438**</b>	<b>C</b>	<b>Opened 06/2013</b>				<b>150.00</b>
<b>Grant &amp; Weber</b> <b>861 Coronado Center Drive</b> <b>Suite 211</b> <b>Henderson, NV 89052</b>		<b>Collections Agency - Las Vegas Cardiology</b>				
Account No. <b>xxxxx8010</b>	<b>C</b>	<b>Payday Loan</b>				<b>350.00</b>
<b>Money Tree</b> <b>P.O. Box 58363</b> <b>Seattle, WA 98138-1363</b>						
Account No. <b>x3106**</b>	<b>C</b>	<b>Opened 01/2014</b>				<b>326.00</b>
<b>Plus Four, Inc.</b> <b>P.O. Box 95846</b> <b>Las Vegas, NV 89193-5846</b>		<b>Collections Agency - Desert Radiologists</b>				
Account No. <b>2820****</b>	<b>C</b>	<b>Opened 08/2011</b>				<b>4,177.00</b>
<b>Quantum Collections</b> <b>3080 S. Durango Drive</b> <b>Suite 105</b> <b>Las Vegas, NV 89117-4411</b>		<b>Collections Agency - West Valley Imaging</b>				
Account No. <b>4206****</b>	<b>C</b>	<b>Opened 02/2014</b>				<b>806.00</b>
<b>Quantum Collections</b> <b>3080 S. Durango Drive</b> <b>Suite 105</b> <b>Las Vegas, NV 89117-4411</b>		<b>Collections Agency - Wassim A Madi, MD.</b>				
Sheet no. <u>5</u> of <u>6</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) <b>5,809.00</b>

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(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>x1668**</b>  <b>Seattle Service Bureau</b> <b>18912 North Parkway</b> <b>Suite 205</b> <b>Bothell, WA 98011</b>		<b>Opened 03/2013</b>  <b>Collections Agency - Sound Physicians of Nevada</b>				<b>525.00</b>
Account No. <b>4378**</b>  <b>Sentry Recovery &amp; Collections</b> <b>3090 S. Durango Road</b> <b>Suite 100</b> <b>Las Vegas, NV 89117-9186</b>		<b>Opened 12/2013</b>  <b>Collections Agency - Vista Del Rey Apts.</b>				<b>3,188.00</b>
Account No. <b>xxxxx6054</b>  <b>Spring Valley Hospital Medical Center</b> <b>P.O. Box 31001-0827</b> <b>Pasadena, CA 91110-0827</b>		<b>Medical Services</b>				<b>23,052.80</b>
Account No.						
Account No.						
Sheet no. <b>6</b> of <b>6</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>Subtotal</b> (Total of this page)
						<b>26,765.80</b>
						<b>Total</b> (Report on Summary of Schedules)
						<b>85,818.53</b>